## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

**CLAIMS AS FILED - PART I** 

Application or Docket Number

10786493

| (Column 1) (Column 2)   |  |   |               |                                       |             |                             | SMALL ENTITY TYPE |          |                        | OTHER THAN OR SMALL ENTITY |                    |                        |  |
|---|--|---|---------------|---------------------------------------|-------------|-----------------------------|-------------------|----------|------------------------|----------------------------|--------------------|------------------------|--|
| TOTAL CLAIMS  |  |   | 12            |                                       |             |                             | RA                | _        | TEEE                   | 7<br>7                     |                    |                        |  |
| FOR   |  |   | 1             |                                       |             |                             | l. <del>[</del>   |          | FEE                    | -                          | RATE               | FEE                    |  |
|   |  |   | NUMBER FILED  |                                       | NUME        | BER EXTRA                   | BASI              | J FEE    | 385.00                 | OR                         | BASIC FEE          | 770.00                 |  |
| TOTAL CHARGEABLE CLAIMS   |  |   | 12 mi         | nus 20=                               | *           |                             |                   | 9=       |                        | OR                         | X\$18=             |                        |  |
| INDEPENDENT CLAIMS  |  |   |               |                                       |             |                             | X4                | 3=       |                        | OR                         | X86=               | 420                    |  |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |               |                                       |             |                             | +14               | 5=       |                        | OR                         | +290=              | 1-2-                   |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2              |  |   |               |                                       |             |                             | TOT               | AL       |                        | OR                         | TOTAL              | 1200                   |  |
| CLAIMS AS AMENDED - PART II   |  |   |               |                                       |             |                             |                   | •        | <b></b>                |                            | OTHER              |                        |  |
| _   |  | (Column 1)                                |               |                                       |             | (Column 3)                  | SMALL ENTITY      |          |                        | OR                         |                    |                        |  |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |               | HIGHE<br>NUMB<br>PREVIO<br>PAID F     | ER<br>USLY  | PRESENT<br>EXTRA            | RA                | E        | ADDI-<br>TIONAL<br>FEE |                            | RATE               | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus         | **                                    |             | =                           | X\$               | 9=       |                        | OR                         | X\$18=             |                        |  |
|   | Independent                                    | *   | Minus         | ***                                   |             | =                           | X43               | =        |                        | OR                         | X86=               |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |  |   |               |                                       |             |                             |                   | ō=       |                        | OR                         | +290=              |                        |  |
|   | 1367891112                                     |   |               |                                       |             |                             |                   | TAL      |                        | OR                         | TOTAL<br>ADDIT FEE |                        |  |
| (Column 1) (Column 2) (Column 3)  |  |   |               |                                       |             |                             |                   |          |                        |                            | ADDII. FEE         |                        |  |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |               | HIGHE<br>NUMB<br>PREVIOU<br>PAID F    | ER<br>JSLY  | PRESENT<br>EXTRA            | RAT               | E        | ADDI-<br>TIONAL<br>FEE |                            | RATE               | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus         | **                                    |             | =                           | X\$ 9             | =        |                        | OR                         | X\$18=             |                        |  |
|   | Independent                                    | *   | Minus         | ***                                   |             | =                           | X43               | _        |                        | ı                          | X86=               |                        |  |
| `   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |               |                                       |             |                             |                   | $\dashv$ |                        | OR                         |                    |                        |  |
|   |  |   |               |                                       |             |                             |                   | =        |                        | OR                         | +290=              |                        |  |
|   |  |   |               |                                       |             |                             |                   | EE L     |                        | OR                         | TOTAL<br>ODIT. FEE |                        |  |
|   |  | (Column 1)                                |               | (Columi                               | n 2)        | (Column 3)                  | ·. · .            | •        |                        |                            |                    | ·                      |  |
| MEN   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |               | HIGHE:<br>NUMBE<br>PREVIOU<br>PAID FO | ER<br>JSLY  | PRESENT<br>EXTRA            | RATI              |          | ADDI-<br>TIONAL<br>FEE |                            | RATE               | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus         | **                                    |             | =                           | X\$ 9             | .        |                        | OR                         | X\$18=             |                        |  |
|   | Independent                                    |   | Minus         | ***                                   |             | =                           | X43=              | _        |                        | _                          | X86=               |                        |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |               |                                       |             |                             |                   | +        |                        | OR                         | 700-               |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |  |   |               |                                       |             |                             |                   |          |                        | OR                         | +290=              | · .                    |  |
| H   | the "Highest Nur<br>the "Highest Nur           | TOT<br>ADDIT. F                           |               | 7 · .                                 | OR A        | TOTAL<br>DDIT. FEE          |                   |          |                        |                            |                    |                        |  |
| Ţ   | he "Highest Num                                | ber Previously Paid                       | For (Total or | Independent                           | l) is the h | ણ ભારત ૩.<br>lighest number | found in the      | appro    | opriate box            | in colu                    | <b>ກກ 1.</b>       |                        |  |